

SUMMARY OF FINDINGS

- 2.4% of those reported in the survey, or almost 50,000 Utahns, reported that they had a problem obtaining needed medical, dental, or mental health care in the 12 months before the survey interview.
 - » About 2% of Utahns had problems obtaining needed dental care, obtaining medical care was a problem for about 1% of Utahns, and obtaining mental health care was a problem for less than 1% of Utahns.
 - » Young adults, age 18-34, were more likely than other age groups to report problems accessing needed care (5%).
 - » Persons without health insurance (10%) and those with household incomes below \$15,000 (8%) were also likely to report problems obtaining needed health care in the past 12 months.
 - » Concerns about cost and health insurance were most often cited as reasons for problems obtaining needed care.
- Most persons (69%) have a family practice or other medical doctor who serves as their primary care provider. However, 18% of persons in the survey had neither a provider nor a place where they typically go for medical care.
 - » Young adults age 18-34 (30%) and especially males in this age group (39%) were more likely than other age groups to report no primary provider or usual place of care.
 - » 40% of those who lacked health insurance also lacked a primary provider or usual place of care.
- Most persons (75%) usually go to a doctor's office when they need health care or advice. However, a substantial number (12%, or almost 250,000 persons) would typically go to a hospital emergency department or urgent care center (9% urgent care center, 3% hospital emergency department).
 - » Persons who had no primary provider (28%) and those who lacked health insurance (21%) were more likely than average to go to a hospital emergency department or urgent care center for health care or advice.
- Males made, on average, 2.9 visits to medical doctors in the past 12 months, compared with 4.0 visits for females in all age groups. Certain groups had more medical visits than average:
 - » Utahns age 65 and over (6.0), especially males age 65 and over (7.4),
 - » Utahns living in poverty (5.7), and those in households with less than \$15,000 annual income (5.5),
 - » Utahns with good, fair, or poor health status (5.6), and
 - » Utahns with a chronic medical condition, such as diabetes or heart disease (6.3).
- Only about half (56%) of Utahns had a routine preventive health visit in the past year.
 - » Persons age 65 and over (86%) and persons with a chronic medical condition (73%) were likely to have had a routine preventive health care visit.
 - » Persons with household incomes under \$15,000 (70%) were more likely than other income groups to have had a routine health visit. The reason for this pattern is not clear. The pattern was apparently not due to poorer health status among lower income groups, as it was found among persons with excellent and very good health.
 - » Those who reported having problems obtaining needed care (68%) were also likely to have had a routine health visit.

- 3.8% of Utahns had been hospitalized in the 12 months before the survey.
 - » The percentage was much higher (11%) for Utahns with annual household incomes below \$15,000.
 - » Persons with a chronic medical condition were also more likely to have been hospitalized (13%).
- Among adult Utahns, 9% reported that they sought care from a mental health professional in the 12 months before the survey.
 - » 17% of adult Utahns were categorized* as having below-average mental health. Of those Utahns, 26% (about 59,000 persons) sought care from a mental health professional.
 - » Among adult Utahns, 68% were categorized as having average mental health, and 16% with above average mental health. Of those two groups combined, 5% (about 58,000 persons) sought care from a mental health professional.
 - » Adults with household incomes under \$15,000 were more likely than others to be categorized as having below-average mental health (32%) and to have sought care from a mental health professional (19%).
 - » Some Utahns (37,500 persons) had below-average mental health and considered seeking care, but did not consult a mental health professional. The most frequently cited reasons for delaying care were cost, financial, and health insurance concerns.

* Mental health status was categorized using the Medical Outcomes Study 12-item health status measure (MOS, SF-12). For more information, see the report entitled *Health Status in Utah: The Medical Outcomes Study SF12*. (Bureau of Surveillance and Analysis, 1997)